## PROCESSED JUL 2 4 2008 > THOMSON REUTERS

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: July 31, 2008
Estimated average burden
hours per response......16.00

SEC USE ON	NLY
Prefix	Serial
DATE RECEI	VED

	his is an amendment and name has changed, and indicate in Sankaty Credit Opportunities (Offshore Master) I		
	t apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ S		
Type of Filing: New Filing [			
	A. BASIC IDENTIFIC	CATION DATA	
<ol> <li>Enter the information request</li> </ol>			
	is an amendment and name has changed, and indicate c	hange.)	
Sankaty Credit Opportunities	(Offshore Master) IV, L.P.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (incli	
c/o Sankaty Advisors, LLC 111 Huntington Avenue		(617) 516-2700	
Boston, MA 02199			
	perations (Number and Street, City, State, Zip Code) ces)	Telephone Number (incl	08056384
Brief Description of Business Private Investment Fund			
Type of Business Organization	<u> </u>		
corporation	☐limited partnership, already formed	<b>5</b>	
	The balance of the factor of	☑ other (please specify): Cayman Isla	inds exempted limited partnership
business trust	limited partnership, to be formed		
Actual or Estimated Date of Inco	orporation or Organization:  Month Year  0 3 0 8		
Jurisdiction of Incorporation or 0	Organization: (Enter two-letter U.S. Postal Service abbi		
	CN for Canada; FN for other for	reign jurisdiction) F N	
GENERAL INSTRUCTIONS			
77d(6).  When To File: A notice must be Exchange Commission (SEC) or	ing an offering of securities in reliance on an exemption  filed no later than 15 days after the first sale of securities the earlier of the date it is received by the SEC at the avoid United States registered or certified mail to that addres	es in the offering. A notice is deemed file ddress given below or, if received at that	ed with the U.S. Securities and
Where to File: U.S. Securities a	nd Exchange Commission, 450 Fifth Street, N.W., Wash	hington, D.C. 20549.	
	$\frac{1}{2}$ of this notice must be filed with the SEC, one of which the copy or bear typed or printed signatures.	h must be manually signed. Any copies r	not manually signed must be
	ling must contain all information requested. Amendment and any material changes from the information previous		
Filing Fee: There is no federal f	iling fee.		
State:			

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall

## A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Executive Officer ☐ Director General Partner Check Box(es) that Apply: Promoter Beneficial Owner Full Name (Last name first, if individual) Sankaty Credit Opportunities Investors (Offshore) IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199 ☐ Executive Officer Director General Partner of the General Check Box(es) that Apply: Promoter Beneficial Owner Partner Full Name (Last name first, if individual) Sankaty Credit Member (Offshore), Ltd. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199 Check Box(es) that Apply: Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Sankaty Advisors, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 111 Huntington Ave., Boston, MA 02199 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Bain Capital, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 111 Huntington Ave., Boston, MA 02199 Executive Officer General and/or Managing Partner Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Director Full Name (Last name first, if individual) Lavine, Jonathan Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199 Check Box(es) that Apply: Promoter Beneficial Owner ■ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Barnes, Timothy M. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ■ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Bevacqua, Michael J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Exter. Diane Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199 Check Box(es) that Apply: Promoter ☐ Beneticial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Goss, Michael Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199

Check Box(es) that Apply: Promoter

Full Name (Last name first, if individual)

□ Executive Officer

Director

General and/or Managing Partner

☐ Beneficial Owner

Hawkins, Jeffrey							
Business or Residence Address (Number and Street, City, State, Zip Code)							
c/o Sankaty Advisors, LLC, 111 Huntington Ave., Boston, MA 02199							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Kellogg, James, III							
Business or Residence Addre	•		•				
c/o Sankaty Advisors, LLC	, 111 Hunting	ton Ave., Boston, MA 0	2199		• 00 - 00		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, i	if individual)						
McCarthy, David							
Business or Residence Addre							
c/o Sankaty Advisors, LLC	, 111 Hunting	ton Ave., Boston, MA 0	2199				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner		
Full Name (Last name first, i	if individual)						
Mugford, Kristen							
Business or Residence Addre							
c/o Sankaty Advisors, LLC	, 111 Hunting	ton Ave., Boston, MA 0	2199				
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, i	if individual)						
Wolin, Steven							
Business or Residence Addre	`		,				
c/o Sankaty Advisors, LLC	, 111 Hunting	ton Ave., Boston, MA 0	2199				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, i	f individual)	•					
Davies, Stuart							
Business or Residence Addre							
c/o Sankaty Advisors, LLC	, 111 Hunting	ton Ave., Boston, MA 0	2199				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if individual)							
DeSimone, Jonathan							
Business or Residence Addre	*		•				
c/o Sankaty Advisors, LLC	, 111 Hunting	ton Ave., Boston, MA 0	2199				

11198327\_1.DOC 3

						B. INFO	RMATIO	N ABOU	T OFFER	RING					
I,	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Yes	No							
					,	Answer also	in Append	lix, Columr	2, if filing	under ULO	E.				
2.	What i	s the minin	num investi	ment that w	ill be accep	ted from ar	y individua	al? *Subjec	t to discret	ion of the (	General Pa	ırtner		\$ 1,000,	000*
3.	3. Does the offering permit joint ownership of a single unit?							Yes	No ⊠						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.															
Full N N/A	lame (La	ast name fi	rst, if indiv	idual)											
	ess or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip (	Code)								
Name	of Asso	ciated Bro	ker or Deal	er											
States	in Whi	ch Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers								
ı	(Check '	'All States'	" or check i	ndividual S	tates)				************			All States			
;	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full N	ame (L	ast name fi	rst, if indiv	idual)	•	•	•		•			•			
Busin	ess or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)					•			
Name	of Asso	ciated Bro	ker or Deal	er					<del> </del>				·		
States	in Whic	h Person l	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						· · · · · · · · · · · · · · · · · · ·		
(Chec	k "All S	tates" or cl	heck individ	dual States)		***************************************						All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[H1] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]		
			rst, if indiv									<u></u>			
Busin	ess or R	esidence A	.ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name	of Asso	ciated Bro	ker or Deal	er											
States	in Whic	h Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers								
(Chee	k "All S	tates" or cl	heck individ	Jual States)								All States			
1	[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]		

[TX] [UT] [VT] [VA] [WA] [WV] [WI] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

11198327\_1.DOC

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	s
	Equity	S	s
	☐ Common ☐ Preferred		1
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	\$ 4,000,000,000	\$ 1,939,368,500
	Other (Specify)	\$	s
	Total	\$ 4,000,000,000	\$ 1,939,368,500
	Answer also in Appendix, Column 3, if filing under ULOE.		1_0 :,::::
2	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and		
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$ 1,939,368,500
	Non-accredited Investors.		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		S
	Rule 504		S
	Total		S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		S
	Legal Fees	⊠	\$ 200,000
	Accounting Fees		S
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		\$
	Total	$\boxtimes$	\$ 200,000

	C. OFFERING FRICE, NONDER OF INVESTORS, EAFER	13E3 AND USE OF TROCEEL	<u></u>
4.	b. Enter the difference between the aggregate offering price given in response to Part C - Quexpenses furnished in response to Part C - Question 4.a. This difference is the "adjusted grossissuer."		# 2 400 400 000
	issuci.		\$ 3,999,800,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be the purposes shown. If the amount for any purpose is not known, furnish an estimate and che left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to forth in response to Part C - Question 4.b. above.	eck the box to the	
		Paym	ents to
		Officers,	Directors,
		& Afi	Thates Payments To Others
	Salaries and fees	<u>                                </u>	□ <b>\$</b>
	Purchase of real estate	<u> </u>	□ <b>\$</b>
	Purchase, rental or leasing and installation of machinery and equipment	\$	<b>\$</b>
	Construction or leasing of plant buildings and facilities	<u> </u>	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$	□ \$
	Repayment of indebtedness	<u> </u>	□ <b>\$</b>
	Working capital.	<u></u> \$	□ <b>\$</b>
	Other (specify): Investments in securities and expenses necessary, convenient, or inciden	tal thereto.	⊠ \$ 3,999,800,000
	Column Totals	\$	⊠ \$ 3,999,800,000
	Total Payments Listed (column totals added)	-	☑ \$ 3,999,800,000
	D. FEDERAL SIGNATURE	· · · · · · · · · · · · · · · · · · ·	
The	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the		the following signature constitutes
an u	andertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon writ accredited investor pursuant to paragraph (b)(2) of Rule 502.		
Iss Sa	suer (Print or Type) unkaty Credit Opportunities (Offshore Master) /, L.P.	Date July 15	2008
	ame of Signer (Print or Type) Title of Seerer (Print or Type) Trian Lavine Title of Seerer (Print or Type) Director print of General Partner of the	General Partner of the Issuer	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

